G & JULI MUS

PTO/SB/80 (12-03)

Approved for use through 11/30/2005. OMB 0651-0035

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Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):					
Name Registration Number					
as attomey(s) or agent(s) to represent the undersigned before the					
as attomey(s) or agent(s) to represent the undersigned before the any and all patent applications assigned only to the undersigned attached to this form in accordance with 37 CFR 3.73(b).	Ounted States Patent and Trademant according to the USPTO assignment (Office (USPTO) in connection with records or assignment documents 			
Assignee Name and Address:					
Koninklijke Philips Electronics N.	.V.				
Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands	5				
•					
A copy of this form, together with a statement und required to be filed in each application in which the	ler 37 CFR 3.73(b) (Form PT	O/SB/96 or equivalent) is			
may be completed by one of the practitioners and	is lotti is used. The statem	ent under 37 CFR 3.73(b)			
Attorney isto be filed.	ust identify the application	In which this Power of			
The individual whose signature and title is supp	f Assignee of Record lied below is authorized to act on bel	half of the assignee			
Matthieu van Kaam					
[hum	Date	Amil 69, 2004			
Authorized Representative	Telephone	(914) 333-9600			

This collection of information is required by 37 (37 than 1.31) and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



PTO/SB/96 (08-03)

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STATEMENT UNDER 37 CFR 3.73(b)				
Applicant/Patent Owner: Koninklijke Philips Electronics N.V.				
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently			
Entitled: DEVICE FOR HANDLING AT LEAST ONE OP	TICAL DISC, AND METHOD FOR THIS PURPOSE			
Koninklijke Philips Electronics N.V. (Name of Assignee)	a <u>corporation</u> (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)			
states that it is: 1. ☑ the assignee of the entire right, title, and interes	t; or			
2. an assignee of less than the entire right, title and The extent (by percentage) of its ownership inte in the patent application/patent identified above by virt	rest is ————— %			
A. [] An assignment from the inventor(s) of the paten in the United States Patent and Trademark Office attached.	at application/patent identified above. The assignment was recorded e at Reel, Frame, or for which a copy thereof is			
OR				
B. [] A chain of title from the inventor(s), of the patent below:	application/patent identified above, to the current assignee as shown			
1. From:	—— To: —————			
The document was recorded in the United	d States Patent and Trademark Office at, or for which a copy thereof is attached.			
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From: The document was recorded in the United	To:			
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[] Additional documents in the chain of title				
[] Copies of assignments or other documents in the c [NOTE: A separate copy (i.e., the original assignm	chain of title are attached. The sent document or a true copy of the original document) The sent document or a true copy of the original document or a true copy or a true copy or a true copy of the original document or a true copy or			
The undersigned (whose title is supplied below) is auth $12.17.6 \mathcal{F}$				
Date	Michael E. Belk, Reg. 33,357			
(914) 333-9643	Typed or printed name Muluu Bac			
Telephone number				
Totophone number	Signature			
	Corporate Counsel Title			

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COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL020612 US

As a below named inventor, I he	ereby declare that:			
My residence, post office addre	ess and citizenship are as state	ed next to my name.		
plural names are listed below) of	of the subject matter which is one optical	name is listed below) or an original, folialmed and for which a patent is soudisc, and method for this pu	ught on the invention	
is attached hereto.				
was filed as United States a	pplication			
Serial No				
on				
and was amended				
on				
was filed as PCT internation Number PCT/IB2003/00265				
on 24 June 2003				
and was amended under PCT Article 19				
on			(if applicable).	
claims, as amended by any am	endment referred to above.	nts of the above-identified specificat		
Title 37, Code of Federal Regul				
or inventor's certificate or of an States of America listed below any PCT international application	y PCT international applicatior and have identified below any on(s) designating at least one	States Code, § 119 of any foreign aph(s) designating at least one country foreign application(s) for patent or incountry other than the United States the application(s) of which priority is	other than the United nventor's certificate or s of America filed by me	
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119		
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	02077729.8	8 July 2002	YES	
	l			

Comb (includ	bined Declaratio	n For Patent Applic	ation and Pow	er of Attorney (Continue	d)	Attorneys Docket Number PHNL020612 US
				the following attorney(s) and/otherewith. (List name and regis		
Micha	E. Haken, Reg. No ael E. Marion, Reg rd M. Blocker, Re	g. No. 32, 266				none Calls to: elephone number) 0222
	FULL NAME OF INVENTOR	FAMILY NAME VAN DER AA		FIRST GIVEN NAME Michael		SECOND GIVEN NAME Adrianus Henricus
201	RESIDENCE & CITIZENSHIP			The Netherlands		COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	NIJSSE		FIRST GIVEN NAME Gerard		SECOND GIVEN NAME Johannes Pieter
202	RESIDENCE & CITIZENSHIP	Eindhoven		The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
x	POST OFFICE ADDRESS	Post office address Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME JANSEN		FIRST GIVEN NAME Gerardus STATE OR FOREIGN COUNTRY / 2 /		SECOND GIVEN NAME Lucien Mathildus COUNTRY OF CITIZENSHIP
2 63	RESIDENCE &	Eindhoven		The Netherlands		The Netherlands STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa		5656 AA Eindhove	en ⁽	The Netherlands
to be t	rue: and further that	these statements were under section 1001 if Titl	made with the kno	wledge that willful false staten	nents and the I	information and belief are believed ike so made are punishable by fine ements may jeopardize the validity of
SIGNA	ATURE OF INVENTO	OR 201	SIGNATURE OF	FINVENTOR 202	SIGNA	ATURE OF INVENTOR 203
DATE	05 February	y 2004	DATE		DATE	

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL020612 US

As a below named inventor, I h	ereby declare that:		
My residence, post office addre	ess and citizenship are as state	ed next to my name.	
plural names are listed below)	of the subject matter which is one optical	ame is listed below) or an original, laimed and for which a patent is so disc, and method for this p	ought on the invention
is attached hereto.			
was filed as United States a	application		
Serial No			
on			
and was amended			
on			
	nal application		
Number PCT/IB2003/002650			
on 24 June 2003			
24 Julie 2003			
and was amended under PCT	Article 19		
on			(if applicable).
I hereby state that I have revier claims, as amended by any am		nts of the above-identified specific	ation, including the
I acknowledge the duty to disci Title 37, Code of Federal Regu		rial to the examination of this applic	cation in accordance with
or inventor's certificate or of an States of America listed below any PCT international applicati	by PCT international application and have identified below any lon(s) designating at least one	States Code, § 119 of any foreign and the state of the application of which priority of the state of the application of which priority	ry other than the United inventor's certificate or es of America filed by me
PRIOR FOREIGN/PCT APPLI	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 11	9:
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	02077729.8	8 July 2002	YES
		DEDARTMENT OF COMMERCE - Par	hand Trademarks Office

(Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)					Attorneys Docket Number PHNL020612 US
			EY: As a named inventor, I hereby app e Patent and Trademark Office connec			
N	Micha	E. Haken, Reg. No nel E. Marion, Re rd M. Blocker, Ro	g. No. 32, 266		Direct Teleph (name and te (914)332-0	lephone number)
		FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME
		INVENTOR	VAN DER AA	Michael		Adrianus Henricus
20	201	RESIDENCE &	CITY	STATE OR FOREIGN COUN	TRY	COUNTRY OF CITIZENSHIP
		CITIZENSHIP	Eindhoven	The Netherlands		The Netherlands
		POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY
			Prof. Holstlaan 6	5656 AA Eindhove	n l	The Netherlands
,		FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME Johannes Pieter
			NIJSSE	Gerard		
2	.02		CITY Eindhoven	STATE OR FOREIGN COUNTY The Netherlands		
	POST OFFICE POST OFFICE ADDRESS		CITY	~/	STATE & ZIP CODE/COUNTRY	
		ADDRESS Prof. Holstlaan 6		5656 AA Eindhove	5656 AA Eindhoven ′	
		FULL NAME OF FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
		INVENTOR	JANSEN_	Gerar <u>dus</u>		
2	203	RESIDENCE &	CITY	STATE OR FOREIGN COUN	TRY \	COUNTRY OF CITIZENSHIP The Netherlands
	/	CITIZENSHIP Eindhoven		The Netherlands //	The Netherlands // / /	
1		POST OFFICE	POST OFFICE ADDRESS	CITY	7	STATE & ZIP CODE/COUNTRY
		ADDRESS	Prof. Holstlaan 6	5656 AA Eindhove	n `	The Netherlands
t c t	o be t or imp he ap	rue: and further that		knowledge that willful false stateme	ents and the lil ful false stater	ke so made are punishable by fine

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DATE 29 January 2004

(July 1994)

29 January 2004

DATE

DATE